

**Iowa Medicaid  
Clinical Advisory Committee**



Meeting Minutes  
October 17, 2014  
1:00 p.m. - 4:00 p.m.

Iowa Medicaid Enterprise conference rooms 128 & 130

1.	<p>Welcome and Introductions - Jason Kessler, MD, Pediatrics, IME Medical Director, opened the meeting by welcoming everyone and making introductions of CAC members. Present: Andrea Silvers, MD, Family Practice; Sherry Buske, ARNP, Family Practice; Joseph Kimball, DO, Family Practice; Patricia Magle, MD, Family Practice, Christopher Goerdts, MD, Internal Medicine, Mark Davis, PA-C, Family Practice; Daniel Wright, D.O., Pediatrics; and Nicholas Galimoto, MD, Family Practice. Absent: Dawn Schissel, MD, Family Practice. Non-committee members present: Elizabeth Matney, Andria Seip, Pam Smith, Marni Bussell, Pam Lester, Meagan Evans, Melody Walter, Sally Nadolsky, Nick Ford, Kelly Espeland, Julie Knipp, Jan Hutcheson, Cathy Vanderlinden, and Jane Riggins. Dr. Kessler provided an overview of the responsibilities of the CAC. CAC member terms were explained and Dr. Kessler stated no members will be needed for this committee until January 2016.</p>		Dr. Kessler
2.	<p>Approval of Minutes from the July 18, 2014 Meeting Motion to approve by - Mark Davis Seconded by - Patricia Magle Minutes were unanimously approved.</p>		Dr. Kessler
3.	Medicaid Updates		
	<p>A. Managed Healthcare Clinical Advisory Committee - i. HMO/Meridian Update - Liz stated the contract for the Iowa Plan SFY15 rates have been submitted to CMS. The SFY15 rates for Meridian require more analysis. The utilization of IHAWP contains an unknown population of members not from Iowa Care. Assumptions were built in and will now be re-evaluated for appropriateness. Three additional counties are pending for HMO expansion. Meridian will expand in 13-15 counties. She explained the ELIAS program is used for those enrolled in Medicaid and not put in a managed care program. They are currently working on placing these members into a managed care program.</p>		Elizabeth Matney

**Iowa Medicaid  
Clinical Advisory Committee**



	<p>ii. Magellan Update - Liz stated the medically exempt referrals are mostly from Magellan. Utilization review will be conducted to see if they meet the necessary identifiers. Then they can access follow-up services for mental health and substance abuse issues. They are currently working on referrals to Integrated Health Homes to improve the outcomes for Medicaid members.</p> <p>Liz stated there are no new initiatives at this time. She stated there will be member education provided on the expectations that come with now having health insurance coverage.</p>		
	<p>B. Iowa Health &amp; Wellness Plan Update - Andria provided handouts to the CAC members and the power point slides will be sent to them. The Iowa Wellness Plan is for persons at 0-100 percent of the federal poverty level (FPL). A primary care provider (PCP) coordinates care and referrals for the member. The Marketplace Choice is for persons at 101-133 percent of the FPL. Members select a commercial health plan, either CoOpportunity or Coventry, and Medicaid pays the premiums on behalf of the member. The Medically Exempt enrollment is currently 13,011. Andria explained how to make a provider referral to qualify the member as medically exempt. The Healthy Behaviors program can waive any possible premium for the next year of enrollment. Members have 12 months to complete this program. Andria stated the wellness exam is explained in Information Letter #1425. The health risk assessment is completed by the member who receives a 5-digit code from their provider. A customized direct mail campaign to the members began in October. A provider toolkit is available at: <a href="http://www.iahealthlink.gov/sites/default/files/ProviderHealthyBehaviorsToolkit.pdf">http://www.iahealthlink.gov/sites/default/files/ProviderHealthyBehaviorsToolkit.pdf</a>. Information on the Iowa Health and Wellness Plan is available at: <a href="http://dhs.iowa.gov/ime/about/iowa-health-and-wellness-plan">http://dhs.iowa.gov/ime/about/iowa-health-and-wellness-plan</a>.</p>		Andria Seip

**Iowa Medicaid  
Clinical Advisory Committee**



	<p><b>C. Pharmacy/DUR Update -</b>  Pam stated the P &amp; T will meet in November to conduct an annual review of the preferred drug list (PDL) and discuss switches from brand to generic. The DUR is looking at the controlled use of narcotics with a three month quantity limit of opiates. The prior authorization (PA) form will be updated and administration will begin November 1. They are looking at the use of anti-psychotics in adults and children to incorporate the following edits: stop at the point of sale (POS); age edit to prompt a PA for children age six and under; and a duplicate therapy edit to prompt a PA. In late spring/early summer they will be looking at children under age 17. The DUR is looking for a physician member to serve a four-year term on this committee.</p>		Pam Smith
	<p><b>D. State Innovation Model (SIM) Update -</b>  Marni provided handouts to the CAC members. She stated the ACO adoption in Iowa began in 2012 and now includes eight major health systems which covers 18 percent of Iowa's population. She stated the State Healthcare Innovation Plan (SHIP) has the goal of transforming the delivery of health care to include the following: expand the ACO model to full Medicaid; align with other payers; support the ACO delivery system; improve population health; engage patients/improve health literacy; collect social determinants of health; evaluate and monitor; achieve scale within an ACO model; and track value index score (VIS) improvement. Marni stated the anticipated award announcement will be made in November/December 2014. In 2016, there will be an addition of two project managers and one support staff at IME as well as three new staff at IDPH.</p>		Marni Bussell
	<p><b>E. Health Homes Update -</b>  Pam stated there are currently 6,000 members in 95 clinic sites with 700 providers in 36 counties across Iowa. They are working on a change in the payment system from claim based to attestation through a web portal. They are looking at the waiver programs to determine how many are enrolled in a HH. There are currently 26,000 enrolled in a waiver program with 516 in a HH. For the Intellectual Disability waiver (IDW), there are 143 in a HH which is one percent. They will be utilizing a report from IMPA to track the members on waiver programs. For the medically exempt, there are 237 in a HH.</p>		Pam Lester

**Iowa Medicaid  
Clinical Advisory Committee**



	<p>There are currently 1,400 on the Lock-In (LI) program with 158 in a HH. They are working on collaboration between the case managers and the HH coach. They are also working with Magellan to have HH presentations across the state. Pam stated 56 percent of the HH members had an office visit within the last six months.</p> <p>Dr. Kessler will see if someone from the Lock-In program can present at the next CAC meeting.</p>		
4.	<p>New Guidelines for palivizumab from the AAP and DUR's response.</p> <p>Dr. Kessler stated the red book is updated every three years and is not due to be updated for another year. As a result, the AAP decided to come out with new guidelines at this time. The cap for age of infants will be 29 weeks rather than 34 weeks. The changes can be found at <a href="http://pediatrics.aappublications.org">http://pediatrics.aappublications.org</a>. The DUR response will be to update the Medicaid criteria and PA form on the IME website. A list of all PA required medications in one location can be found at <a href="https://www.iowamedicaidpdl.com/PA_criteria">https://www.iowamedicaidpdl.com/PA_criteria</a>.</p> <p>Dr. Kessler stated Synagis is used as prophylaxis and not an immunization. It is a monthly injection usually given during RSV season to decrease hospitalization costs. \$2000/injection for five months would be \$10,000 and is less than the cost of an inpatient hospital admission and stay.</p>		Dr. Kessler
5.	<p>Public Comment Period -</p> <p>There were no public comments.</p>		
6.	<p>A. Criteria Review</p> <ol style="list-style-type: none"> <li>1. Ceiling Track Lifts - no changes recommended.</li> <li>2. Electric Patient Lifts - no changes recommended.</li> <li>3. Hemangioma Removal - no changes recommended.</li> <li>4. Home-Vehicle Modification - no changes recommended.</li> <li>5. Mobility Related Devices - no changes recommended.</li> <li>6. Nipple Tattooing - Criterion #2 added "or genetic risk as documented by genetic testing".</li> <li>7. Nursing Facility Level of Care - to defer to next CAC meeting.</li> <li>8. Skilled Level of Care - to defer to next CAC meeting.</li> </ol>		Dr. Kessler

**Iowa Medicaid  
Clinical Advisory Committee**



	<p>9. Pediatric Skilled Level of Care - Under Skilled Nursing Facility level of care #3 changed “physician orders” to “licensed practitioner” and added #4. Before criteria listing, added “skilled services must include at least one of the following”.</p> <p>10. Nutritional Counseling - no changes recommended.</p> <p>11. Pain Management - no changes recommended.</p> <p>12. Panniculectomy - Removed criterion #7. Added reference LCD L30733.</p> <p>13. Power Wheelchair Attendant Controls - no changes recommended.</p> <p>14. Pre-Vocational Services - no changes recommended.</p> <p>15. Virtual Colonoscopy - Added codes and references.</p>		
7.	<p>Old Business</p> <p>1. Discussion and review of sample Health Risk Assessment for Iowa Health and Wellness members. The member takes this form to the physician office visit. Copies of the full assessment will be sent to the CAC members.</p>		Committee
8.	<p>New Business/Discussion</p> <p>Discussion around Medicaid communications to providers and how to obtain automated updates.</p> <p>Subscribe to Informational Letters:  <a href="#">Informational Letters</a>  This section is a list of correspondence sent out by the Iowa Medicaid Enterprise (IME) to update providers on any policy changes that will affect them. All Informational Letters are organized by their year of publication and assigned numeric sequence of the Informational Letter. The Informational Letters in this section are also an important cross reference for any new policy changes that have been implemented but are not yet reflected in the published Provider Manual.  To subscribe to this page's updates, please <a href="#">Log In</a>.</p> <p>Subscribe to the Iowa Health and Wellness Plan updates:  <b>Iowa Health and Wellness Plan email Updates:</b> To subscribe, please email your name, organization, and contact information along with the subject line “Subscribe” to <a href="mailto:IMECommunications@dhs.state.ia.us">IMECommunications@dhs.state.ia.us</a>. Email updates are sent as new and breaking information on the Iowa Health and Wellness Plan is available.</p>		Dr. Kessler Committee

**Iowa Medicaid  
Clinical Advisory Committee**



	<b>IME Newsletter:</b> Individuals can also subscribe to the monthly Iowa Medicaid Enterprise newsletter, Endeavors Update. The subscription process is similar there. To subscribe, please email your name, organization, and contact information along with the subject line “Subscribe” to <a href="mailto:IMENewsletter@dhs.state.ia.us">IMENewsletter@dhs.state.ia.us</a> . These newsletters are comprehensive of Iowa Medicaid activities, and send on a monthly basis.		
9.	Upcoming Meetings		Dr. Kessler
	A. January 16, 2015		
	B. April 17, 2015		
	C. July 17, 2015		
10.	Adjournment of Meeting		Dr. Kessler

**Contact:**

Jason Kessler, MD, Medical Director  
(515) 256-4635  
[jkessle@dhs.state.ia.us](mailto:jkessle@dhs.state.ia.us)

Darla Baarda  
(515) 974-3016  
[dbaarda@dhs.state.ia.us](mailto:dbaarda@dhs.state.ia.us)